NINTENDO WORLD CLASS SERVICE®

FIELD ACTION REQUEST

Service Center Account Number: _____ Date of Request: _____

Servicer Name: _____

Primary Contact: _____ Phone #: _____

Submitted By: _____ Title: _____

Issue/Opportunity for Improvement: _____

_____

_____

_____

_____

_____

Action Recommended: _____

_____

_____

_____

FOR FIELD SERVICE DEPARTMENT USE ONLY

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Assigned To: _____ Date: _____

Action Taken: _____

_____

_____

_____

_____

Date Completed/Returned: _____ By: _____

****

Response to Account By: _____ Date: _____

(Attach documentation if applicable)

Return this request immediately to:

Jim Rushton
Nintendo of America Inc.
Field Service Department
P.O. Box 97081
Redmond, Washington 98073-9781